

Audit Report

Of HAP 2007 Standard

Summary Findings

Application Organisation Information

Organisation:	OFADEC	Audit Ref / No:	A001/0307-HAP
Location:	Villa No 302 Hann Mariste II Dakar, Senegal	Head Office/Field Site:	Dakar/ Dakar & Podor
Auditor:	Virginia Vaughn Certification #0307006	Date (s):	14-17 March 2007
Agency Representative:	Mamadou Ndiaye	Role of Representative	CEO

Background

OFADEC is a Senegalese NGO consisting of 20 staff members.

OFADEC's headquarters are in Dakar and project field sites include Dakar and the 283 refugee settlements along Senegal's northern border with Mauritania.

In light of its size, HQ and Field audits were carried out simultaneously between 14th and 17th March 2007.

Methodology

The scope of OFADEC Audit was:

- The Head Office: based in Dakar – through on site audit
- The Field Site Operations: Northern Podor project offices and the project site office (BOS-Dakar).

The audit comprised of the following approaches:

Phase One: Document Review

Documents of processes and policies presented by OFADEC in support of their compliance statement.

Phase Two: On Site Audit at Head Office

Document verification and interviews with Head Office staff took place between 14th and 17th March 2007.

Phase Three: On Site Audit in Selected Field Site

Document verification, interviews and good practice observation with field office staff and beneficiaries took place between 16th and 17th March 2007

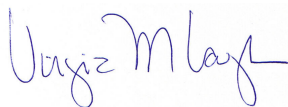
Outcome

As a certified auditor (s) of the HAP 2007 Humanitarian Accountability and Quality Management Standard, we have audited OFADEC in relation to its conformity with the HAP 2007 Standard. The audit was carried out between 14 and 17 March 2007 covering both Head Office and Field Sites.

The evidence provided in support of the Application for Certification is the responsibility of the Board and the Senior Management of OFADEC. Our responsibility is to express an opinion both on the evidence provided and the interviews carried out during the audit. We confirm that we both meet the formal requirements for HAP auditors concerning professional competence and independence.

Our audit was conducted in accordance with the procedures approved by the HAP Certification and Accreditation Review Board, and following the ISO 19011:2002 Auditor Standard, which together require that an audit be planned and performed to obtain reasonable assurance about whether the agency is in conformity with the HAP Standard. We (I) have audited the agency on a sample test basis through an examination of documentary evidence disclosed and through interviews with OFADEC staff and beneficiaries of its humanitarian operations. We (I) believe that the audit provides a reasonable basis for our (my) opinion.

In my (our) opinion the agency is in compliance with the HAP 2007 Standard, with findings summarised in the auditor's report.



Virginia Vaughn
Independent Registered Auditor
Reg No: 0307006



Sheryl Haw
Certification Manager

Summary Findings

CAR: Corrective Action Request

Date: Deadline for providing a Corrective Action Response that demonstrates what actions have been undertaken to rectify the minor or major non-compliance identified.

HAP Standard	Head Office		Field Site(s)	
	MAJOR	MINOR	MAJOR	MINOR
<i>Non-Compliance</i>				
Qualifying Norms				
Benchmark 1		Requirement 1.2 CAR: 03/01/08		
Benchmark 2				Requirement 2.1 CAR: 03/10/08
Benchmark 3				
Benchmark 4				
Benchmark 5		Requirement 5.5 CAR: 03/10/08		
Benchmark 6		Requirement 6.1 CAR: 03/10/08		
Total	0	3	0	1

Major Non Compliance: this will result in a delay in the recommendation for certification process, which can only proceed once the correction actions have been met and verified.

A major non-compliance could be due to a number of reasons such as:

- Complete absence of a procedure as noted in the Standard
- A series of minor non-conformances all focused on the same element of the standard
- A serious violation of qualifying norms and/or humanitarian principles
- A clear lack of control on some key management issues
- Immediate dangers for the beneficiaries or for the quality of the service to the beneficiaries
- A Minor detected in a previous audit not addressed within the specified time
- False Declarations

Minor Non Compliance: this will not result in a delay of the recommendation for certification but will require corrective action within a specified time frame.

A minor non-compliance could be due to a number of reasons such as:

- Failure to implement management system policy / guidelines systematically
- Incomplete key documents / records
- Oversight